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641—135.2(147A) Trauma triage and transfer protocols.

135.2(1) Trauma triage and transfer protocols approved by the department shall be utilized to assist personnel from each service program and trauma care facility. This requirement shall not preclude service programs or trauma care facilities from making emergency revisions of the approved triage and transfer protocols when an incident overburdens medical care resources causing unnecessary delay in patient care.

- a. Adoption by reference. The "Out-of-Hospital Trauma Triage Destination Decision Protocol" (Adult and Pediatric, November 2001) and the "Inter-Trauma Care Facility Triage and Transfer Protocol" (August 1996) are incorporated by reference and adopted as the out-of-hospital trauma triage destination decision and the intertrauma care facility triage and transfer protocols. For any differences which may occur between the adopted references and these administrative rules, the administrative rules shall prevail.
- b. The out-of-hospital trauma triage destination decision protocol (Adult and Pediatric) and the intertrauma care facility triage and transfer protocol are available through the Iowa Department of Public Health, Bureau of EMS, Lucas State Office Building, Des Moines, Iowa 50319-0075, or the bureau of EMS Web site (www.idph.state.ia.us/ems).
- c. Revisions and modifications to the out-of-hospital trauma triage destination decision protocol and the intertrauma care facility triage and transfer protocol may be made upon recommendation to the department from the system evaluation quality improvement committee (SEQIC) or the trauma system advisory council (TSAC). Revisions and modifications shall be approved by the department.
- d. The director, pursuant to rule, may grant a variance from the requirements of rules adopted under this chapter for any hospital, emergency care facility, or service program provided that the variance is related to undue hardships in complying with this chapter or the rules adopted pursuant to this chapter.

135.2(2) Reserved.